Debtor 1	Dense		Williams
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	ankruptcy Court for	the: District	t of
Case number (If known)	17-1	3209	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

APR 27 2017

JEFFREY P. ALLSTEADT, CLERK

Check if this is an amended filing

Official Form 103A

Application for Individuals to Pay the Filing Fee in Installments

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Part 1: Specify Your Proposed Payment Timetable				
1.	Which chapter of the Bankruptcy Code are you choosing to file under?	Chapter 7 Chapter 11 Chapter 12 Chapter 13		
2.	You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to pay them. Be sure all dates are business days. Then add the payments you propose to pay. You must propose to pay the entire fee no later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final payment timetable.	You propose to pay \$ 77.50 \$ 17.50 \$ 17.50	With the filing of the pertition On or before this date	
	Total	\$ 310.00	On or before this date	
Pa	ort 2: Sign Below			

By signing here, you state that you are unable to pay the full filing fee at once, that you want to pay the fee in installments, and that you understand that:

- You must pay your entire filing fee before you make any more payments or transfer any more property to an attorney, bankruptcy petition preparer, or anyone else for services in connection with your bankruptcy case.
- You must pay the entire fee no later than 120 days after you first file for bankruptcy, unless the court later extends your deadline. Your debts will not be discharged until your entire fee is paid.
- If you do not make any payment when it is due, your bankruptcy case may be dismissed, and your rights in other bankruptcy proceedings may be affected.

Signature of Debtor 1

Signature of Debtor 2

Your attorney's name and signature, if you used one

Date OH 27 3017

Date MM / DD / YYYY

Date ______MM / DD / YYYY